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John Spring
LINN
4703

WATER WELL REPORT

RECEIVED
MAY 21 1962

10/3W-14B

STATE OF OREGON STATE ENGINEER State Well No. State Permit No.

(1) OWNER:
Name *Scravel Hill Water Coop.*
Address *R# 2 Box 261 Albany Ore.*

(2) LOCATION OF WELL:
County *Linn* Owner's number, if any—
1/4 1/4 Section *14 T. 10S R. 3W W.M.*

Bearing and distance from section or subdivision corner
850' S, and 140' E from the 1/4 corner on the North line of Sec 14 T 10S R 3W W.M. Linn Co., Ore.

(3) TYPE OF WORK (check):
New Well Deepening Reconditioning Abandon
If abandonment, describe material and procedure in Item 11.

PROPOSED USE (check):
Community Domestic Industrial Municipal Irrigation Test Well Other
(5) TYPE OF WELL:
Rotary Cable Dug Driven Jetted Bored

(6) CASING INSTALLED:
" Diam. from *7* ft. to *28 1/2* ft. Gage *250*
" Diam. from _____ ft. to _____ ft. Gage _____
" Diam. from _____ ft. to _____ ft. Gage _____

(7) PERFORATIONS:
Type of perforator used *1/4 x 4 Slots*
SIZE of perforations *1/4 x 1/4* by _____ in.
" perforations from *23* ft. to *27 1/2* ft.
" perforations from _____ ft. to _____ ft.
" perforations from _____ ft. to _____ ft.
" perforations from _____ ft. to _____ ft.

(8) SCREENS:
Well screen installed Yes No
Manufacturer's Name _____
Type _____ Model No. _____
" Slot size *Set from* _____ ft. to _____ ft.
" Slot size *Set from* _____ ft. to _____ ft.

(9) CONSTRUCTION:
Was well gravel packed? Yes No Size of gravel: _____
Gravel placed from _____ ft. to _____ ft.
Was a surface seal provided? Yes No To what depth? *10* ft.
Material used in seal *1/2 yds Concrete*
Did any strata contain unusable water? Yes No
Type of water? *Med Soft* Depth of strata *17 FT*
Method of sealing strata off _____

(10) WATER LEVELS:
Static level *19* ft. below land surface Date *12-6-61*
Artesian pressure _____ lbs. per square inch Date _____

Log Accepted by:
[Signed] *Scravel Hill Water Coop* Date *4-28*, 19*62*
Wm Cherry Pres. (Owner)

(11) WELL TESTS:
Drawdown is amount water level is lowered below static level
Was a pump test made? Yes No If yes, by whom? *Driller*
Yield: *750* gal./min. with *1* ft. drawdown after *12* hrs.
" " " " " " "
" " " " " " "
Bailer test gal./min. with _____ ft. drawdown after _____ hrs.
Artesian flow _____ g.p.m. Date _____
Temperature of water *52* Was a chemical analysis made? Yes No

(12) WELL LOG:
Diameter of well _____ inches.
Depth drilled *28 1/2* ft. Depth of completed well *28 1/2* ft.
Formation: Describe by color, character, size of material and structure, and show thickness of aquifers and the kind and nature of the material in each stratum penetrated, with at least one entry for each change of formation.

MATERIAL	FROM	TO
Surface + Chag	top	7
Yellow Chag + Red Sand	7	9
Loose gravel	9	28
Sand + gravel	28	28 1/2

Work started *12-6* 19*61*. Completed *12-8* 19*61*

(13) PUMP:
Manufacturer's Name *Universal Jacuzzi*
Type: *5 H.P. Shallow Well* H.P. *5*

Well Driller's Statement:
This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.
NAME *Ac Drilling Co* (Type or print)
Address *1710 2nd Oregon*
Driller's well number _____
[Signed] *Bill Hamilton* (Well Driller)
License No. *52* Date *12-13, 1961*